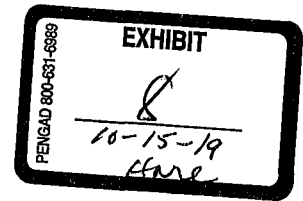


# **EXHIBIT V**



Date: April 7, 2017

To: Marthilde Brzycki, Health Care Specialist  
Harborview Stroke Center

From: Tricia Roland, Manager  
Harborview Stroke Center

Subject: Step C Final Counseling– Unsatisfactory Work Performance and Unprofessional Conduct

You have been employed at the University of Washington's Harborview Medical Center in a permanent capacity since January 26, 2015; and currently hold the position of Health Care Specialist in the Harborview Medical Center Stroke Center.

**Job Description:**

The Stroke Health Care Specialist provides evaluation and treatment of inpatient and outpatient stroke patients. As a provider in the Stroke Clinic the Health Care Specialist sees patients discharged from the hospital after stroke for medical management, counseling, care coordination and monitoring for secondary stroke prevention services. The Stroke Health Care Specialist is a resource for inpatient staff and can help coordinate daily essential patient needs in collaboration with the Stroke Resource Nurse.

The Stroke Health Care Specialist works collaboratively with all hospital and clinic personnel to ensure the best care for the patients and ensure for a smooth transition during the continuum of care. The person in this position functions as a positive member of the team and plays a valuable role in Joint Commission/regulatory activities to facilitate real time success of core measures and quality improvement initiatives. The job description for this position is attached for your review (Attachment A).

**Reason for Current Counsel:**

I began working at the Stroke Center in August of 2016 and began my work to understand the roles and responsibilities of each staff member, as well as the workflow that our team was responsible for. In mid-September, I began to notice that I often could not find you when you were expected to be in the office. I also began to receive feedback from the physicians we work with that you often did not attend rounds, or that you would start rounds with the teams and then would leave rounds unexpectedly. Other physicians reported that they would see you getting breakfast during rounds or heading back out to your car.

A review of your garage entry and exit times, along with your clocking times raised more questions and it appeared that you were clocking in remotely, prior to arriving to work on many days.

In addition, your engagement with me as your leader was deteriorating. I found that when I asked you about your work I could not get a clear answer about how you were spending your time. My efforts to provide you with clear direction and to problem solve with you were met with resistance and dismissiveness. It became clear that you were working to avoid interacting with me and on several occasions you went to other members of our team with concerns rather than trying to work with me. With these performance concerns in mind, I determined it would be best to hold an investigatory interview to gather information about what was happening.

On November 17, 2016 I provided you with a notice of an investigatory interview to take place on December 5, 2017. Over the next several months, you and I met at three investigatory interviews (December 5, 2016, February 13, 2017 and February 16, 2017<sup>1</sup>). Also present were Kelly Paananen, Director of Health Care Specialists, Nola Balch, Human Resources Consultant and representatives from UW Medicine Finance, UW Internal Audit, and your union representative.

Information gathered through the investigatory process revealed the following significant concerns with your work performance and professional conduct:

- **Time and Attendance:** Working from home, working remotely and clocking in/out remotely without authorization and in specific violation of directives given to you by Kathy Hare. Working off the clock without authorization. Accruing overtime without authorization. Failure to inform manager of unexpected absences in accordance with expectations.
- **Failure to Perform Assigned Work:** Not attending rounds with the team. Failure to complete Epic Inbasket work. Failure to complete patient notes in a timely manner. Failure to attend required meetings.
- **Failure to Appropriately Safeguard Patient Information:** Removal of patient documents off site without authorization. Storage of electronic documents containing PHI on personal zip drives. Storage of PHI/Patient Documentation on work computer hard drive.
- **Use of Work Time to Conduct Non Work-Related Web Searches and Use of University Computers for Personal Use**
- **Unprofessional Conduct and Ineffective Communication:** Insubordination as evidenced by working remotely and clocking in and out remotely despite direction not to do so; failure to adjust your schedule to ensure you did not accrue overtime as you had been directed; refusal to complete stroke center Inbasket work during a staff meeting; failure to return to your office to complete your work when not rounding or seeing patients – despite being directed to do so; and failure to complete charting as directed. Active avoidance of your manager and colleagues by working in your car and other locations as opposed to your office. Interrupting. Making assumptions without seeking full understanding, leading to faulty judgments and unprofessional actions. Engaging in gossip. Raising your voice in anger when communicating with others and speaking in an argumentative and disrespectful manner. Routing concerns to people other than your direct manager, despite redirection. Disrupting patient care activities as a result of unprofessional behavior. Dishonesty and engaging in personal attacks.

As a result of your escalating unprofessional conduct and ineffective communication, you were placed on a paid administrative leave on February 14, 2017, pending the outcome of the investigation.

#### **Impact of your Actions/Behavior:**

Insubordinate behavior does not allow us to meet our operational objectives and compromises the trust that your supervisors have in your ability to be an effective member of the Stroke Center team. Insubordination is unprofessional conduct, results in greater scrutiny of your performance and may lead to fewer opportunities for you at work.

When you fail to perform your assigned work, patients do not receive the best, most timely and complete care. Your colleagues depend on you to complete your work so that they, in turn can complete their own. When this does not happen the delays can be significant and may cause problems in delivering appropriate care. When you

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<sup>1</sup> There was a gap in the investigatory interview dates due to your approved medical leave for the dates of 12/7/2016 through 2/2/2017.

fail to attend required meetings, you miss important information and are unable to effectively partner in furthering the work of our program.

When you don't take the required steps to protect patient information, you increase the risk that patient information can be inappropriately disclosed.

Utilizing UW computers for personal reasons is a violation of UW policy. Time spent on searching the web for personal reasons during your work shift deters you from focusing on your work in service of our patients.

I feel it's important for you to understand how your unprofessional conduct and ineffective communication impacted your colleagues and patients. Several colleagues expressed concern that your behaviors and communications were creating an uncomfortable and unprofessional work environment within the Stroke Center and within the clinic. There were legitimate concerns that the needs of our patients were not being met and that your engagement around these concerns were a barrier to moving forward with changes that needed to be made to improve flow and process.

When you are not available to your colleagues as was the case in working from remote locations, it creates a barrier to work being completed in a timely manner and can directly impact patient care. Understanding your role and the role of your colleagues is crucial as a team member and although I would not expect you to understand everything I need to do to keep this program going, I expect that as an employee of Harborview and a member of this team that you work as a positive and constructive member of the team.

People expressed that they didn't want to upset you as it would lead to continued disruption and often they struggled with getting their jobs done because they didn't want to upset you by approaching you. I had several people approach me about your behavior and several stated "I just want to stay out of the drama" after being approached by you and you sharing your thoughts about my abilities to manage the Stroke Center. I also found that the negative, untruthful and disruptive manner that you engaged in communicating with our colleagues regarding me were damaging and undermining to relationships I was building with our colleagues and negatively impacted progress that I was trying to make.

**Performance Expectation:**

All performance expectations are outlined in the attached Step C Final Counseling Action Plan. It is my expectation that you abide by all expectations outlined in the action plan in a consistent and ongoing basis. You are to achieve all action items within the time frame defined in the action plan, unless I approve an alternative time frame. Failure to meet these expectations may result in a recommendation for your dismissal from employment with Harborview Medical Center.

**Step C Counseling Session:**

In an effort to resolve these issues, I have scheduled a Step C counseling session with you for Thursday, April 13, 2017 at 2:00pm in the Pat Steel Building, Suite 3014. I have asked Kelly Paananen and Jennifer Petritz, Employee Relations Director to also attend this session.

At this meeting, I will provide counseling regarding this matter and detail the performance expectations that have not been met. In addition, we will discuss the attached draft Step C Final Counseling Action Plan to assist you in meeting expectations in the future. Please be prepared to discuss the draft action plan at our meeting, and be ready to offer suggestions that will aid you in meeting departmental expectations.

Consistent with the UW/SEIU 1199NW Collective Bargaining Agreement, you are entitled to have a Union representative present. It is your responsibility to make arrangements for this representative to be present. If you cannot attend this meeting, it is your responsibility to contact me at least 24 hours prior to the meeting time so the meeting can be re-scheduled within the next 3 days. If this meeting does not occur, we will consider you to be in the agreement with the attached action plan and have acknowledged receipt of this corrective action.

**Human Resources Assistance:**

If you or experiencing medical concerns that are impacting your ability to maintain regular attendance or perform your work; you are encouraged to contact our department's Leave and Accommodation Specialist, Debbie Reandeu, at 206-744-9229.

**UW Care Link and Employee Assistance Program:**

If you believe that factors outside of work may be affecting you, please be aware that the UW Care Link and the Employee Assistance Program are available to assist University employees. Please call **toll-free: 1-866-598-3978** for routine and urgent issues. Master's-level counselors are available to take your call 24/7. In addition, you may also seek assistance by visiting the website online at <http://hr.uw.edu/worklife/uw-carelink/>.

If you have any questions, please feel free to talk with me prior to the scheduled meeting.

cc: Personnel File

**Attachments:**

- A. Position Description – Stroke Center Health Care Specialist
- B. HMC Attendance Policy
- C. UW Medicine Privacy, Confidentiality and Information Security Agreement
- D. UW Medicine Compliance Policy PP-30
- E. UW Medicine Electronic Data Policy SP-01
- F. UW Administrative Policy Statement 47.2 "Personal Use of University Facilities, Computers and Equipment by University Employees"
- G. UW Medicine Service Culture Guidelines
- H. HMC Professional Conduct Policy

Marthilde Brzycki, Health Care Specialist – Step C Final Action Plan  
April 13, 2017

**Unsatisfactory Work Performance**

Problem	Expectation	Action to be Taken	Timeframe
<b>Time and Attendance:</b> 1. Clocking in remotely 2. Working from home and off the clock. 3. Accruing overtime without authorization. 4. Not informing manager of unexpected absences in accordance with expectations.	<p>Stroke Center staff are expected to clock-in to KRONOS on site. Remote clock-in to KRONOS is disallowed.</p> <p>Stroke Center staff are not authorized to work from home or remotely.</p> <p>Any overtime worked needs to be approved in advance by the Stroke Center Manager.</p> <p>Stroke Center staff will abide by the HMC Attendance Policy, 105.8.</p> <p>When there is an unexpected absence or tardiness, Stroke Center staff are to directly notify their manager of the unexpected absence or tardiness. Staff are expected to call in a minimum two hours in advance of their start time. Staff are to provide the reason for their absence (personal illness; illness of a family member (who); approved FMLA; workplace injury; and expected duration of absence), the duration of their expected absence.</p> <p>Planned absences must be requested and approved in advance by Stroke Center Manager.</p>	<p>You will only work when on site at Harborview Medical Center unless attending a community outreach event approved in advance by your manager. Hours worked at an offsite event will be entered into KRONOS by your manager/fiscal specialist.</p> <p>There will be no working from home or working remotely (to include while in your car parked on the street, the parking garage or other locations). No exceptions.</p> <p>You shall clock in and out at badge reader at HMC on 3CT.</p> <p>All overtime must be approved in advance by Stroke Center Manager. Work hours may be adjusted as needed throughout the Monday through Friday work week to ensure completion of work and in order to meet the needs of the department with the approval of the Stroke Center Manager.</p> <p>Within the expected time frame you will communicate directly with your manager via phone if you will not be at work related to an unexpected absence or an approved FMLA. Any planned absences (vacation/sick leave) will be requested through KRONOS and verbally to Manager within expected time frames.</p>	<p>All expectations are to be met immediately unless otherwise noted and be sustained throughout HMC employment</p>
Failure to perform assigned work	Perform work as assigned by manager; in accordance with the Stroke Center	Within seven calendar days of the Step C Final Counseling session; read, sign and follow the updated	All expectations are to be met

Step C Final Action Plan: Unsatisfactory Work Performance/Unprofessional Conduct  
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<ol style="list-style-type: none"> <li>1. Failure to round with the team.</li> <li>2. Failure to complete Epic In-basket duties</li> <li>3. Failure to complete notes in a timely manner</li> <li>4. Failure to attend required meetings</li> </ol>	<p>Health Care Specialist Job Description and within the scope of your license.</p> <p>Attend required meetings/rounds as directed by your manager. Proactively communicate with your manager if a conflict arises in regard to completing your assigned work as directed.</p>	<p>Stroke Center Health Care Specialist job description (Attached).</p> <p>Attend 7:30 am rounds with the post-call neurologist's team, Monday – Thursday. Attend radiology rounds starting at 0930, Monday through Thursday. You are expected to return to your office in the Stroke Center following the conclusion of Radiology Rounds.</p> <p>You are expected to be at the start of radiology rounds. If neurology rounds are not over by the start of radiology rounds and a new stroke patient has been admitted <u>immediately</u> communicate with the Stroke Center Manager to request approval to be late for radiology rounds and for additional time in the neurology rounding.</p> <p>Complete Epic In-basket duties as detailed in your job description.</p> <p>Any inpatients seen outside of team rounding will have a note documented in the patient's chart immediately.</p> <p>Outpatient clinic notes will be completed as follows:</p> <ul style="list-style-type: none"> <li>• Tuesday clinic notes will be completed by end of business day on the following day.</li> <li>• Friday clinic notes will be complete by end of day</li> </ul> <p>Any prep for clinic will be done on the day of patient visit and will consist of reading pertinent notes, images, and hospital D/C summary.</p> <p>Complete work as assigned by manager in the time frame that is allotted. If you are unable to complete the work as assigned, communicate proactively with your manager to problem solve and prioritize.</p>	<p>immediately unless otherwise noted and be sustained throughout HMC employment</p>
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		<p>You will attend all mandatory meetings including:</p> <ul style="list-style-type: none"> <li>• Stroke Leadership meeting - First Monday of the month 1-2pm</li> <li>• Stroke Office meeting - Every other Wednesday or per manager's discretion</li> <li>• Stroke Center Meeting - Second Monday of the month 1030-1130</li> <li>• Stroke Center QI Meeting - Second Thursday of the month 11:00-12:00 pm</li> <li>• Telestroke partner meeting - Quarterly 3rd Wednesday 1-2:30</li> <li>• Stroke Case Conference and didactic – every Friday 1430-1600</li> <li>• Other meetings as directed by manager</li> </ul> <p>Attendance at Neuro lecture series and Thursday webinar are optional. Any attendance during paid work time will be attended in person. Attendance during paid work time is not authorized if other work is incomplete.</p>	
<p>Failure to appropriately safeguard patient information.</p> <ol style="list-style-type: none"> <li>1. Removal of paper documents containing patient information off-site without authorization.</li> <li>2. Storage of electronic documents containing PHI on a personal zip drives.</li> <li>3. Storage of PHI/Patient Documentation on work computer hard drive.</li> </ol>	<p>All UW Medicine workforce members are to abide by UW Medicine Compliance Policies, including PP04 – Privacy, Confidentiality and Information Security Agreement, which states;</p> <p><b>Confidentiality of Information</b> – “I will access, use and disclose protected information only as allowed by my job duties and limit it to the minimum amount necessary to perform my authorized duties. I understand my access will be monitored to assure appropriate use.</p>	<p>Complete 2017 Annual Refresher Training on LMS within 2 weeks of returning to work.</p> <p>Renew your understanding by reviewing and signing another UW Medicine “Privacy, Confidentiality and Information Security Agreement” within seven calendar days of the Step C Final Counseling session</p> <p>No electronic or paper documents containing PHI are to be removed from the workplace. You are not authorized to complete work activities off-site or remotely, or to remove confidential data from UW Medicine facilities.</p>	<p>All expectations are to be met immediately unless otherwise noted and be sustained Throughout HMC employment</p>

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	<b>Computer Security</b> – “I will store all protected information on secured systems, encrypted mobile devices, or other secure media.”	Do not copy or transfer PHI/Patient Documentation onto the hard drive of your work computer or any other computer or mobile device.  Assure the protection and confidentiality of all forms of PHI at all times.  Review UW Medicine Compliance Policy PP-30 and UW Medicine’s Electronic Data Policy SP-01, within seven calendar days of the Step C Final Counseling session. Abide by these and all UW Medicine Compliance policies on an ongoing basis.	
Use of work time to conduct non work-related web searches.  Use of University computers for personal use	Abide by UW Administrative Policy Statement 47.2.	Refrain from utilizing work time to engage in non-work-related activities.  Do not utilize University/HMC computers for personal use outside of what is allowable under 47.2.  Review APS 47.2 within seven calendar days of the Step C Final Counseling session. Abide by this policy on an ongoing basis.	All expectations are to be met immediately unless otherwise noted and be sustained throughout HMC employment

#### Unprofessional Conduct and Ineffective Communication

Problem	Expectation	Action to be Taken	Timeframe
Unprofessional Conduct and Ineffective Communication as evidenced by: 1. Insubordination 2. Active avoidance of communication with your manager. 3. Interrupting conversations 4. Making assumptions without seeking full understanding, leading to	All communications to and about others are to be professional, respectful and in accordance with the UW Medicine’s Service Culture Guidelines and the Professional Conduct Policy, regardless of personal relationships.  When given a directive by your leader(s), you are expected to follow that direction. Refusal to follow a supervisory directive reasonably related to your job function is considered to be insubordination.	Review Service Culture Guidelines and Professional Conduct policy within seven calendar days of the Step C Final Counseling session. Proactively discuss with your manager if you are unclear about expectations contained within the policies. If you do not approach your manager with questions or otherwise concerns about lack of clarity it will be considered that you have complete understanding.  All forms of communication is to be respectful, professional, calm, honest, and effective at all times, regardless of personal relationship	All expectations are to be met immediately unless otherwise noted and be sustained throughout HMC employment

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<p>faulty judgements and unprofessional actions.</p> <p>5. Unavailable to colleagues by inappropriately removing yourself from the work environment.</p> <p>6. Gossiping with colleagues; participating in non-productive conversations</p> <p>7. Routing concerns to people other than direct manager, despite redirection.</p> <p>8. Disrupting patient care activities as a result of unprofessional behavior</p> <p>9. Raising voice in anger when communicating with others and speaking in and argumentative and disrespectful manner.</p> <p>10. Dishonesty</p> <p>11. Engaging in name calling/personal attacks</p>	<p>Employees are expected to act as a member of the team and not make unilateral decisions involving patient care systems/processes.</p> <p>Employees are expected to communicate professionally and effectively with their leadership and fellow coworkers.</p> <p>You are expected to bring questions/concerns to your manager directly and in a timely way.</p> <p>Ensure that you are present in our shared workspace so that you are available to collaborate with your team.</p>	<p>Follow all supervisory directives.</p> <p>To ensure that you are available as a resource to your colleagues and our patients; when not seeing patients in clinic, rounding, assisting with patient education, or attending any previously arranged education/mandatory meetings, you will work in your office.</p> <p>All new stroke patients seen in clinic will have 45 minute appointments. Clinic hours are 12:00-5:00 on Tuesdays and from 8:30-12:15 on Fridays. Ten to twelve patients will be scheduled per week. These numbers are subject to change to meet the needs of our patients.</p> <p>Completed patient education will be communicated to resource RN in order to not duplicate efforts.</p> <p>Alert your manager if you observe a gap in patient care in order to problem solve and develop appropriate systems of care, allowing you to focus on activities appropriate to your role. For example CCN's are the best resource to assist with getting patients PCP appointments after D/C, not the HCS.</p> <p>If issues arise with another staff member that cannot be resolved in a positive, constructive manner, work with your Manager to assist.</p> <p>When problem solving with team members, focus on resolving the problem at hand and not attacking the person(s) you are engaged with. Assume positive intent of those around you.</p> <p>Refrain from gossip.</p>	
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		<p>Take accountability for your actions, communications and for your part in making UW Medicine and your department a positive place for staff, patients and visitors.</p> <p>You will be registered for and are expected to attend the following UW OD&amp;T classes:</p> <ol style="list-style-type: none"> <li>1. <b>Learned Optimism</b> Monday, May 22, 8:30 a.m. - 12:30 p.m. <b>Location:</b> Roosevelt Commons Suite 120 -- 4311 11th Ave NE, Seattle 98105</li> <li>2. <b>How to Give and Receive Feedback</b> Monday, June 12, 9:00 a.m. - 4:00 p.m. <b>Location:</b> Roosevelt Commons Suite 120 -- 4311 11th Ave NE, Seattle 98105</li> </ol>	
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You need to demonstrate immediate, consistent and ongoing improved performance in the areas identified above for the entire duration of your HMC employment. Your ability to demonstrate success in the areas in need of improvement will be monitored on an ongoing basis. My expectation and hope is that you will utilize all venues made available to aid you in meeting these performance standards. Failure to meet performance expectations as detailed above will result in a recommendation for your dismissal.

Your signature indicates that you have reviewed this document.

Marthilde Brzycki, Health Care Specialist – HMC Stroke Center

Date

Tricia Roland, Manager – HMC Stroke Center

Date

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**HARBORVIEW MEDICAL CENTER**  
**Patient Care Services**

**Job Description**  
**Health Care Specialist, Stroke Center**  
**Job Code #8935**

**Attachment** A  
**Page** 1 **of** 5

**CORE VALUES:** This job description is based on the following core values.

**CORE VALUES:**

1. QUALITY OF WORK
2. MISSION CENTERED PROFESSIONAL PRACTICE
3. INTERPERSONAL SKILLS
4. INTEGRITY AND COMPASSION
5. PATIENT CARE ADVOCACY
6. TEAM WORK/COLLABORATIVE PRACTICE
7. INSTRUCTOR/STUDENT/STAFF SATISFACTION/SERVICE EXCELLENCE
8. RESPECT FOR CONFIDENTIALITY

**TITLE:** Health Care Specialist, Stroke Center

**REPORTS TO:** Health Services Manager, Stroke Center

**SUMMARY:**

The Stroke Health Care Specialist is a key member of the Stroke multidisciplinary team and fundamental to the evaluation and treatment of stroke patients both inpatient and outpatient. As a provider in the Stroke Clinic the Health Care Specialist sees patients discharged from the hospital after stroke for medical management, counseling, care coordination and monitoring for secondary stroke prevention services. The Stroke Health Care Specialist is a resource for inpatient staff and can help coordinate daily essential patient needs in collaboration with the Stroke Resource Nurse.

The Stroke Health Care Specialist will work collaboratively with all hospital and clinic personnel to ensure the best care for the patients and ensure for a smooth transition during the continuum of care.

As a member of the stroke center team, the Stroke Health Care Specialist functions as a positive member of the team and plays a valuable role in Joint Commission/regulatory activities to facilitate real time success of core measures and quality improvement initiatives.

**PRIMARY RESPONSIBILITIES:**

**1. Stroke Clinic Responsibilities**

- See all stroke patients discharged from HMC/UWMC 2-3 weeks after discharge during Stroke Clinic (Tuesday 12-5pm /Friday 8:30am-12:15pm). Goal and intent of this visit include:
  - Providing a smooth transition for patients from inpatient to outpatient.
  - Ensure all testing is completed or ordered and help trouble shoot barriers to getting tests complete including any prior authorization needing provider input.
  - Review diagnostic imaging and lab results – discuss with neurologist and or fellow if any concerns

- Ensure all treatment plans at discharge are in line with care being received.
- Complete FMLA/Disability/Medicare forms/ Return to Work letters as needed for any patient you have seen including forms routed to you by neurologists.
- Start Anticoagulation therapy when needed. Especially if patient does not have a primary care provider. Patients should then be followed by an anticoagulation clinic and primary care appointment made.
- Provide clear and concise documentation of visit including
  - Neuro exam and current status
  - Pertinent results
  - Any necessary follow ups including appointments/diagnostics
- Assess need for Outpatient Therapies Such as Neuropsychology, Vocational counseling for return to work issues, PT/OT/Speech and follow-up care.
- Educate the patient and families about Stroke, Stroke Preventions and risk factors
- Monitor Epic in-basket
- Prep as needed for Clinic, this may include:
  - Customize education packets
  - Review plan of care
  - Read D/C summary and any consults/PCP visits that have already occurred.
  - Review notes from daily rounds

## **2. Rounding**

- Attend daily neuro rounds Monday– Thursday at 0730 with post call team neurologist.
- Attend daily radiology rounds Monday – Thursday at 0930.

## **3. Attend Mandatory Meetings**

- Stroke Leadership meeting - First Monday of the month 1-2pm
- Stroke Office meeting - Every other Wednesday or per manager's discretion
- Stroke Center Meeting - Second Monday of the month 1030-1130
- Stroke Center QI Meeting - Second Thursday of the month 11:00-12:00 pm
- Telestroke partner meeting - Quarterly 3rd Wednesday 1-2:30
- Stroke Case Conference and didactic – every Friday 1430-1600
- Other meetings as directed by manager

## **4. Education**

- Participate in educational opportunities appropriate to attain professional goals and to meet The Joint Commission Requirements as a member of the Core Stroke Team.
  - Grand Round on Wednesdays – CME, education, updates and stroke topics
  - Thursday webinars – for educational purposes

- Provide inpatient Stroke Education for complex patients when necessary prior to hospital discharge. This will be as a back up to Stroke Resource Nurse
- Provide ongoing nursing education re stroke care referencing core measures and clinical practice guidelines.
- Assist as needed with presenting education to telestroke partner sites and at staff stroke days

**5. Clinical Responsibilities (inpatient/outpatient)**

- Support delivery of evidence-based acute stroke assessment and management.
- Provide expert nursing consultation and practice oversight.
- Manages critical pathway time frames. Evaluate patient outcomes and identify and intervene on variances.
- Be aware of and participate in current stroke research studies going on at HMC.
- Functions as back up for Stroke Resource Nurse as needed, including but not limited to:
  - Daily tracking and concurrent review of core measures
    - VTE prophylaxis
    - Depression screen
    - Stroke Education
    - Statin prescribed at D/C
    - Swallow screen

**6. EMS feedback**

- All thrombectomy cases brought in by King County medics will have metrics reviewed and sent to King County for QI feedback within 72 hours.

**7. Community Outreach**

- Participate in community outreach events for World Stroke Day and for Stroke Awareness month in May
  - Work with Stroke Resource nurse to plan one community outreach event/year

**8. Hours**

- Health Care Specialist is here 5 days a week Monday – Friday and works 80 hours/2 week pay period
- Health Care Specialist and manager will agree upon schedule. Hours may be flexed to meet the needs of the department without accruing overtime.

**9. Perform other duties as assigned by manager**

**10. Embody the UW Medicine Service Culture Guidelines: *Respect Privacy and Confidentiality, Communicate Effectively, Conduct Myself Professionally, Be Accountable and Be Committed to my Colleagues and to UW Medicine* by demonstrating the following;**

- **Advocacy and Customer Service**
  - Maintains awareness of presence and greets staff, students, visitors, and managers in a manner that conveys a positive reception.
  - Demonstrates an attitude of respect for human dignity and the uniqueness each customer and staff member.
  - Protects confidentiality of written and verbal information according to policy and procedure.
  - Reports when illegal/unethical/unprofessional practice of another member of the health care team occurs.
  - Follows appropriate channels to resolve concerns.
  - Demonstrates courteous and professional communication skills with administrators, co-workers, visitors, instructors and students.
- **Communication and Team Building**
  - Promotes and contributes to the development of teamwork in the service and working relationships between the service and other departments and disciplines.
  - Forms productive working relationships with co-workers.
  - Communicates clearly, directly and on a timely basis.
  - Is open to receiving direction, asks for assistance when needed and treats staff, instructors and students with respect and dignity.
  - Maintains a professional manner at work.
  - Acts as a back up to other support personnel in answering phones, covering breaks, leave coverage, helping all staff, etc.
  - Represents the department in divisional and/or hospital committees and meetings (if applicable).
  - Works independently and uses appropriate resources to meet the needs of the department and customers.
- **Professional Growth and Behavior**
  - Attends and participates in departmental meetings, committees and/or projects; reads minutes or seeks follow-up if unable to attend.
  - Demonstrates reliability in work attendance.
  - Consistently wears identification badge.
  - Contributes to group problem solving and is respectful of the comments of others.
  - Gives and accepts feedback in a constructive and courteous manner.
  - Promotes positive image of self, the department, and Administration.
  - Apprises supervisor of actual and/or potential problems in a timely manner.
  - Is able to resolve conflicts and/or direct to appropriate staff/department for resolution.
  - Completes annual competency validation requirements.
  - Identifies own learning needs and seeks direction for growth.
  - Attends and participates in continuing education programs and in-services which directly affect and improve department operations.
- **Safety and Response to Emergencies**



- Participates in interdepartmental efforts to facilitate a safe environment.
- Understands and follows hospital and departmental protocol for emergencies and disasters.
- Takes immediate action to address environmental, equipment or engineering issues present a potential safety risk.
- Functions within safety, infection control, emergency and equipment guidelines.
- **Quality Assessment and Improvement**
  - Recommends and assists with implementation, as appropriate, solutions for resolving procedural system causes for incidents/risks.
  - Develops clerical organization tools or systems that prevent errors/increase efficiency and accuracy; seeks cost-effective alternatives for routine and specialized office supplies and equipment.
  - Participates in QA/QI activities of the office through the participation in committees, implementation of process improvement initiatives and contribution of suggestions for improvement in patient care delivery.
- **Standards of Daily Practice**
  - Seeks opportunities to help others
  - Aware of departments needs and responds appropriately.
  - Completes work in a timely manner.
  - Quality of work at expected level.
  - Follows through on delegated tasks.
  - Able to prioritize workload requests appropriately
  - Recognizes and communicates changes in PCS Business Operations and Workforce Support needs in a timely manner.
  - Keeps work areas clean and neat.
  - Consistently informs appropriate staff of absence when necessary.
  - Manager requests she be called on cell phone with any unscheduled absences. If no answer please leave a message and send text message.
  - Demonstrates respect for visitors and customers entering the department.
  - Works well as part of the team.

I have read and understood my job description. I also understand that my performance will be evaluated on my ability to meet the responsibilities outlined above.

Employee Name: \_\_\_\_\_

Employee Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Manager Signature: \_\_\_\_\_

Date: \_\_\_\_\_